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Bib Data Sheet

CONFIRMATION NO. 3950

SERIAL NUMBER 10/663,580	FILING DATE 09/16/2003 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 36120
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APPLICANTS

Horacio Abramson, Buenos Aires, ARGENTINA;

** CONTINUING DATA ***** *de*** FOREIGN APPLICATIONS ***** *de*

ARGENTINA P020104229 11/06/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/09/2003

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	ARGENTINA	5	9	1

ADDRESS

000116
 PEARNE & GORDON LLP
 1801 EAST 9TH STREET
 SUITE 1200
 CLEVELAND , OH
 44114-3108

TITLE

Apparatus for the correction of chest wall deformities such as pectus carinatum and method of using the same

FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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